

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street)

1444 DUKE STREET

Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00255695

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☒ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
02 01 2021

through

M M M / D D D / Y Y Y Y Y Y
02 28 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hagan, Timothy, R., Mr.,

Type or Print Name of Treasurer

Signature of Treasurer

Hagan, Timothy, R., Mr.,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
09 22 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
02		01		2021

To:

M M	/	D D	/	Y Y Y Y Y
02		28		2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2021</div></div>		<div><div></div><div>93158.53</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>144884.04</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>131673.85</div></div>	<div><div></div><div>368365.11</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>276557.89</div></div>	<div><div></div><div>461523.64</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>113353.19</div></div>	<div><div></div><div>298318.94</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>163204.70</div></div>	<div><div></div><div>163204.70</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>24742.65</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	57719.33	145468.84
(ii) Unitemized	72391.52	182347.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	130110.85	327815.85
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	130110.85	327815.85
12. Transfers From Affiliated/Other Party Committees.....	90.00	180.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1473.00	40369.26
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	131673.85	368365.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	131673.85	368365.11

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	113353.19	298293.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	113353.19	298293.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	25.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	25.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	113353.19	298318.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	113353.19	298318.94

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	130110.85	327815.85
34. Total Contribution Refunds (from Line 28(d))	0.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	130110.85	327790.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	113353.19	298293.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	113353.19	298293.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Anderson, Stephen, Todd, Mr.,

Mailing Address 590 Western Ave

City
Glen EllynState
ILZip Code
60137-4414FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alliant Credit UnionOccupation (for Individual)
Banking

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.80280

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barbuzza, Jonathan, , Mr.,

Mailing Address 35 Royal Rd

City
FreeholdState
NJZip Code
07728-4384FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
International Longshoremens AssociatioOccupation (for Individual)
Longshoreman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2021

Transaction ID : SA11AI.80391

Amount of Each Receipt this Period

1500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barbuzza, Jonathan, , Mr.,

Mailing Address 35 Royal Rd

City
FreeholdState
NJZip Code
07728-4384FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
International Longshoremens AssociatioOccupation (for Individual)
Longshoreman

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2021

Transaction ID : SA11AI.80392

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1675.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barclay, Anthony, D., Dr.,

Mailing Address 6636 Gran Via Dr NE

City
RockfordState
MIZip Code
49341-9691FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Radiology Muskegon PCOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2021

Transaction ID : SA11AI.80394

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barksdale, Alan, F., Mr.,

Mailing Address 262 W Lake Cir

City
MadisonState
ALZip Code
35758-7921FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info RequestedOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 02 / 2021

Transaction ID : SA11AI.80403

Amount of Each Receipt this Period

400.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barnhouse, Nelson, M., Mr.,

Mailing Address 3041 Biggern Ave SE

City
SmyrnaState
GAZip Code
30082-2101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.80408

Amount of Each Receipt this Period

30.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

680.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barnhouse, Nelson, M., Mr.,

Mailing Address 3041 Biggern Ave SE

City
SmyrnaState
GAZip Code
30082-2101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2021

Transaction ID : SA11AI.80409

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bickler, Brandon, , ,

Mailing Address 20387 Rustic View Rd SE

City
MonroeState
WAZip Code
98272-7607FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.80512

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Black, Nick, , ,

Mailing Address 855 Peachtree St NE Unit 3204

City
AtlantaState
GAZip Code
30308-7437FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

.

Occupation (for Individual)

computer scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2021

Transaction ID : SA11AI.80532

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

1150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blankenship, Van, A., Mr.,

Mailing Address 151 Dexter Cir

City
Madison

State
AL

Zip Code
35757-8005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bastion Technologies, Inc.

Occupation (for Individual)
Aerospace Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2021

Transaction ID : SA11AI.80545

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bookwalter, Charles, , Mr.,

Mailing Address 7490 N 1075 W

City
Thorntown

State
IN

Zip Code
46071-8947

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Intuitive Surgical

Occupation (for Individual)
Sales / entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2021

Transaction ID : SA11AI.80563

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bray, Neil, , Mr.,

Mailing Address 13279 Tierra Heights Rd

City
Redding

State
CA

Zip Code
96003-7488

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.80625

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

875.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burch-Martinez, Berkeley, , Mrs.,

Mailing Address 784 Drifting Wind Run

City
Dripping Springs

State
TX

Zip Code
78620-4463

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ocean View School District

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1097.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2021

Transaction ID : SA11AI.80729

Amount of Each Receipt this Period

67.98

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bussey, Stephen, , Mr.,

Mailing Address 7885 SE 166th Hibernia Ln

City
The Villages

State
FL

Zip Code
32162-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
retired

Occupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2021

Transaction ID : SA11AI.80743

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bussey, Stephen, , Mr.,

Mailing Address 7885 SE 166th Hibernia Ln

City
The Villages

State
FL

Zip Code
32162-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
retired

Occupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2021

Transaction ID : SA11AI.80744

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

167.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bywaters, David, R., Mr.,

Mailing Address 1529 Lynchburg Loop

City

The Villages

State

FL

Zip Code

32162-6031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2021

Transaction ID : SA11AI.80751

Amount of Each Receipt this Period

200.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Caltagirone, Peter, , Mr.,

Mailing Address 3420 Gibstay Cir

City

Anchorage

State

AK

Zip Code

99516-3557

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

State of Alaska Dept. of Natural Resou

Occupation (for Individual)

Senior Legal & Policy Advisor

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 02 / 2021

Transaction ID : SA11AI.80763

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Campbell, Christopher, Jacob, ,

Mailing Address 122 E Elk Ct

City

Hainesville

State

IL

Zip Code

60030-4111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

At&t

Occupation (for Individual)

Customer service

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

900.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2021

Transaction ID : SA11AI.80773

Amount of Each Receipt this Period

900.22

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

1350.22

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clift, Carolyn, C., Ms.,

Mailing Address 6402 Hampton Dr

City

Anchorage

State

AK

Zip Code

99504-4534

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Diamond Athletic Club

Occupation (for Individual)

Fitness Inst.

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 02 / 2021

Transaction ID : SA11AI.80899

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cooney, Thomas, C., Mr.,

Mailing Address 6 Dorlon Dr

City

Queensbury

State

NY

Zip Code

12804-1490

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cooney Financial Advisors

Occupation (for Individual)

CPA

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2021

Transaction ID : SA11AI.80963

Amount of Each Receipt this Period

206.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Craft, Frank, , Mr., Jr.

Mailing Address 405 Central Ave # 31

City

ST PETERSBURG

State

FL

Zip Code

33701-3843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Green Bench Flowers

Occupation (for Individual)

GM

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

275.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2021

Transaction ID : SA11AI.81017

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

706.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. D'Arcy, Toni, , ,

Mailing Address 10241 Democrat Rd

City
Parker

State
CO

Zip Code
80134-5003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11Al.81101

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Danke, Tyler, , ,

Mailing Address 705 Fremont St

City
Fremont

State
WI

Zip Code
54940-9092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Purely Poultry

Occupation (for Individual)

swan slinger

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11Al.81096

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Davis, David, M., Mr.,

Mailing Address 1707 19th St

City
Harlan

State
IA

Zip Code
51537-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Erlbacher Bros. Trucking

Occupation (for Individual)

Truck Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2021

Transaction ID : SA11Al.81112

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dennert, Josh, , ,

Mailing Address 38872 Hobby Dr

City
Aberdeen

State
SD

Zip Code
57401-8154

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.81153

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Earnheart, Bruce, W., Mr.,

Mailing Address 310 Superior Ave Apt F

City
Dayton

State
OH

Zip Code
45406-5453

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Aimbridge Hospitality

Occupation (for Individual)
night auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.81288

Amount of Each Receipt this Period

440.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elliott, Kenneth, , Mr.,

Mailing Address 852 Whitcomb Woods Dr

City
Troy

State
MO

Zip Code
63379-3004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Retailer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2021

Transaction ID : SA11AI.81312

Amount of Each Receipt this Period

103.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

668.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Elyas, Patrick, , ,

Mailing Address 1210 Casiano Rd

City

Los Angeles

State

CA

Zip Code

90049-1614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Snap

Occupation (for Individual)

Sr. Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 02 / 2021

Transaction ID : SA11AI.81318

Amount of Each Receipt this Period

257.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Finkenbiner, Eric, , ,

Mailing Address 1916 Pike Pl Ste 12 # 440

City

Seattle

State

WA

Zip Code

98101-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

United States Department of State

Occupation (for Individual)

Information Management Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.81413

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gann, Randy, Lee, Mr.,

Mailing Address 6335 S 72nd East Ave

City

Tulsa

State

OK

Zip Code

74133-1122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1345.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2021

Transaction ID : SA11AI.81518

Amount of Each Receipt this Period

845.63

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

1253.13

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 79
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garland, Clyde, L., Mr., Jr.

Mailing Address 3100 Rolling Glen Dr

City
BryanState
TXZip Code
77807-3209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
02	08	2021

Transaction ID : SA11AI.81534

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gessner, Maxwell, , ,

Mailing Address 425 Irving Beach Dr SW

City
BemidjiState
MNZip Code
56601-3477FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sanford HealthOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M	D D	Y Y Y Y
02	01	2021

Transaction ID : SA11AI.81563

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gould, Craig, L., Mr.,

Mailing Address 42 Robert Cir

City
CranstonState
RIZip Code
02905-1022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M	D D	Y Y Y Y
02	15	2021

Transaction ID : SA11AI.81616

Amount of Each Receipt this Period

430.00

☐ Memo Item
Contribution
SUBTOTAL of Receipts This Page (optional)..... ►

1058.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Graciano Baldez Neves, Rafael, , ,

Mailing Address 6110 Golden Dewdrop Trl

City
Windermere

State
FL

Zip Code
34786-5696

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.81619

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hogarth, Susan, J., Ms.,

Mailing Address 5901 Penny Rd

City
Raleigh

State
NC

Zip Code
27606-9044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of NC

Occupation (for Individual)
Research Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.81909

Amount of Each Receipt this Period

75.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hoyt, Gregory, , ,

Mailing Address 5733 Minnow Dr

City
Fort Worth

State
TX

Zip Code
76179-7559

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.81960

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hunt, Janine, , ,

Mailing Address 333 S 18th St

City
Blair

State
NE

Zip Code
68008-1956

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.81986

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jones, Michael, C., ,

Mailing Address 2504 Banner Elk Cir

City
Plano

State
TX

Zip Code
75025-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2021

Transaction ID : SA11AI.82100

Amount of Each Receipt this Period

61.80

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kibbe, Theresa, L., Mrs.,

Mailing Address 111 3rd St NE

City
Washington

State
DC

Zip Code
20002-7313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.82172

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

311.80

: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11AI.82172

Additional information received through Treasurer's Best Efforts.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kim, Michael, E., Dr., MD

Mailing Address 1411 Hoolako Pl

City
Wailuku

State
HI

Zip Code
96793-9308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NA

Occupation (for Individual)
Retired Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.82185

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kurczynski, Brodie, , ,

Mailing Address 23702 Porpoise Cv

City

Laguna Niguel

State

CA

Zip Code

92677-1667

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PlayStation

Occupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2021

Transaction ID : SA11AI.82276

Amount of Each Receipt this Period

257.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Labanowski, Jan, K., Mr.,

Mailing Address 2715 Westmont Blvd

City

Columbus

State

OH

Zip Code

43221-3334

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2021

Transaction ID : SA11AI.82285

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

809.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leatherbury, Jennifer, , Ms.,

Mailing Address 126 Archer Rd

City

Newport News

State

VA

Zip Code

23606-1102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pediatrics at Oyster Point

Occupation (for Individual)

Physician Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.82344

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lewis, Aaron, , Dr., Ph. D.

Mailing Address PO Box 380640

City

East Hartford

State

CT

Zip Code

06138-0640

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2021

Transaction ID : SA11AI.82399

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lykins, D., Jeff, ,

Mailing Address 1251 Bluegrass Blvd

City

Batavia

State

OH

Zip Code

45103-7578

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lykins Energy

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2021

Transaction ID : SA11AI.82481

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meadows, John, , ,

Mailing Address 309 S 11th St

City
LincolnState
NEZip Code
68508-2103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Spiral CommunicationsOccupation (for Individual)
System Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.82660

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Merwin, David, , Mr.,

Mailing Address 2324 Middlesex Rd

City
ColumbusState
OHZip Code
43220-4649FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AmwayOccupation (for Individual)
IBO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2021

Transaction ID : SA11AI.82690

Amount of Each Receipt this Period

103.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miranov, Aaron, , ,

Mailing Address 38131 John P St

City
Clinton TownshipState
MIZip Code
48036-1743FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IonbondOccupation (for Individual)
Shipping & Receiving

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.82733

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

356.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miranov, Aaron, , ,

Mailing Address 38131 John P St

City
Clinton Township

State
MI

Zip Code
48036-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ionbond

Occupation (for Individual)
Shipping & Receiving

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2021

Transaction ID : SA11AI.82734

Amount of Each Receipt this Period

200.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miranov, Aaron, , ,

Mailing Address 38131 John P St

City
Clinton Township

State
MI

Zip Code
48036-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ionbond

Occupation (for Individual)
Shipping & Receiving

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2021

Transaction ID : SA11AI.82735

Amount of Each Receipt this Period

175.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Misko, Amy, , Ms.,

Mailing Address 6830 Canal Blvd

City
New Orleans

State
LA

Zip Code
70124-3304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ADN Property Mgm't Services

Occupation (for Individual)
Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1360.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.82737

Amount of Each Receipt this Period

25.75

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

400.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mitchell, Matthew, , ,

Mailing Address 6052 Clubhouse Ln

City
Terre Haute

State
IN

Zip Code
47802-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Walmart

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2021

Transaction ID : SA11AI.82742

Amount of Each Receipt this Period

103.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morris, Jonathan, , Mr.,

Mailing Address 6663 Daylily Dr

City
Carlsbad

State
CA

Zip Code
92011-1269

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USMC

Occupation (for Individual)
USMC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2021

Transaction ID : SA11AI.82793

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Passananti, John, Jackson, ,

Mailing Address 1500 Hancock St Apt 208

City
Quincy

State
MA

Zip Code
02169-5072

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.83026

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

503.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Peichel, Jeremy, , ,

Mailing Address 2071 Rosewood Ln S

City
Roseville

State
MN

Zip Code
55113-5326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.83042

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Penny, John, , ,

Mailing Address 225 S Jamestown Cir

City
Andover

State
KS

Zip Code
67002-8814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.83048

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Perkins, William, O., Mr., III

Mailing Address 6501 Red Hook Plz # 201

City
St Thomas

State
VI

Zip Code
00802-1373

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

36500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2021

Transaction ID : SA11AI.83056

Amount of Each Receipt this Period

36500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Phelan, Tiffany, , ,

Mailing Address 4340 E Indian School Rd Ste 21-491

City
PhoenixState
AZZip Code
85018-5397FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 15 / 2021

Transaction ID : SA11AI.83092

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Phillips, Kimberly, , ,

Mailing Address PO Box 465

City

Cragmoor

State

NY

Zip Code

12420-0465

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Phillips Racing IncOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.83099

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Potter, Pamela, E., Ms.,

Mailing Address 538 Spring Place Rd NE

City

White

State

GA

Zip Code

30184-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.83145

Amount of Each Receipt this Period

300.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

925.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rigg, Morgan, L., Mr.,

Mailing Address 3284 County Road 53

City
Butler

State
IN

Zip Code
46721-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Trinity Lutheran Church

Occupation (for Individual)
Custodian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11Al.83302

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rigg, Morgan, L., Mr.,

Mailing Address 3284 County Road 53

City
Butler

State
IN

Zip Code
46721-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Trinity Lutheran Church

Occupation (for Individual)
Custodian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2021

Transaction ID : SA11Al.83303

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rosen, Andrew, J., Mr.,

Mailing Address 2555 Greenlawn Dr

City
Seven Hills

State
OH

Zip Code
44131-3621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2021

Transaction ID : SA11Al.83376

Amount of Each Receipt this Period

257.50

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

392.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ruks, Thomas, E., Mr.,

Mailing Address 9027 NE Humboldt St

City
PortlandState
ORZip Code
97220-4733FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Deloitte&ToucheOccupation (for Individual)
Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 17 / 2021

Transaction ID : SA11Al.83403

Amount of Each Receipt this Period

25.55

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ruks, Thomas, E., Mr.,

Mailing Address 9027 NE Humboldt St

City
PortlandState
ORZip Code
97220-4733FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Deloitte&ToucheOccupation (for Individual)
Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2021

Transaction ID : SA11Al.83404

Amount of Each Receipt this Period

125.55

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Saunders, William, C., Mr.,

Mailing Address 756 S Warnock St

City
PhiladelphiaState
PAZip Code
19147-2729FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Partners PlansOccupation (for Individual)
Database Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 15 / 2021

Transaction ID : SA11Al.83460

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

401.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schachter, Jeffrey, M., ,

Mailing Address 6 Richard Way

City
Littleton

State
MA

Zip Code
01460-1659

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11Al.83471

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schupp, Lawrence, , ,

Mailing Address 31201 S Highway 125 Unit 5

City
Afton

State
OK

Zip Code
74331-8302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11Al.83510

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Seymour, Chirs, , ,

Mailing Address 3115 Bryce Dr

City
Fort Collins

State
CO

Zip Code
80525-3119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11Al.83546

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shaw, C. Douglas, , Mr.,

Mailing Address 2 W Delaware PI Unit 1305

City
ChicagoState
ILZip Code
60610-3409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Hospital AssociationOccupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2021

Transaction ID : SA11AI.83566

Amount of Each Receipt this Period

300.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheehan, Sam, D., Mr.,

Mailing Address 22413 SE 48th PI

City
IssaquahState
WAZip Code
98029-6803FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vulcan Products CompanyOccupation (for Individual)
Fitter/welder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2021

Transaction ID : SA11AI.83571

Amount of Each Receipt this Period

600.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sheridan, Mark, A., ,

Mailing Address 28 Cutter Ln

City
GlastonburyState
CTZip Code
06033-3240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info RequestedOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2021

Transaction ID : SA11AI.83581

Amount of Each Receipt this Period

515.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1415.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shuford, Robert, F., Mr., Jr.

Mailing Address 6 Whartons Way

City
Hampton

State
VA

Zip Code
23669-1094

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Old Point National Bank

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.83588

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Simmons, Lawrence, J., ,

Mailing Address 107 Bailey Ave Apt 3

City
Pittsburgh

State
PA

Zip Code
15211-1707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NA

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 02 / 2021

Transaction ID : SA11AI.83613

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Simmons, Noah, , ,

Mailing Address 192 Mountain Ridge Trl

City
Stoneville

State
NC

Zip Code
27048-8492

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CTW Home Collection

Occupation (for Individual)
Warehouse Clerk

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.83614

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

778.75

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Simon, John, T., Mr.,

Mailing Address 17728 Honeysuckle Rd

City

Council Bluffs

State

IA

Zip Code

51503-7040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hiland Dairy

Occupation (for Individual)

Transportation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2021

Transaction ID : SA11AI.83616

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smeltz, Alison, , Miss,

Mailing Address 408 N 4th St

City

Sunbury

State

PA

Zip Code

17801-1920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Michael's

Occupation (for Individual)

Cashier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2021

Transaction ID : SA11AI.83642

Amount of Each Receipt this Period

281.10

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stagliano, John, Allen, Mr.,

Mailing Address 14141 Covello St Ste 8C

City

Van Nuys

State

CA

Zip Code

91405-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

EA productions

Occupation (for Individual)

adult video and film sales and product

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2021

Transaction ID : SA11AI.83737

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1381.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Starling, Alvin, , ,

Mailing Address 2242 Chaucer Way

City
Madison

State
OH

Zip Code
44057-2513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.83746

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Strugatskiy, Ivan, , ,

Mailing Address 1081 Palmer Ave

City
Larchmont

State
NY

Zip Code
10538-3316

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.83808

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stump McGinnis, Elizabeth, Anne, Mrs.,

Mailing Address 4886 Proctor Rd

City
Castro Valley

State
CA

Zip Code
94546-1450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2021

Transaction ID : SA11AI.83812

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vega, Julian, , ,

Mailing Address 123 Bishop Lamy Rd

City
LamyState
NMZip Code
87540-9602FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.84036

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilson, Mike, , Mr.,

Mailing Address 422 Jupiter Ave

City
SalinaState
KSZip Code
67401-7379FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2021

Transaction ID : SA11AI.84251

Amount of Each Receipt this Period

103.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Windsor, Charles, B., ,

Mailing Address 4 North Point Dr

City
SheboyganState
WIZip Code
53081-2952FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Windsor Industries, Inc.Occupation (for Individual)
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2021

Transaction ID : SA11AI.84257

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

503.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Yost, Kenneth, , ,

Mailing Address 3005 Thornhill Rd

City
Fayetteville

State
NC

Zip Code
28306-8332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
US Army (Retired)/Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA11AI.84321

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zentz, Samuel, , ,

Mailing Address 950 E Lilac Dr

City
Tempe

State
AZ

Zip Code
85281-1623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Carpenter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2021

Transaction ID : SA11AI.84356

Amount of Each Receipt this Period

257.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

407.50

57719.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 36 OF 79

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LIBERTARIAN PARTY OF COLORADO

Mailing Address 11757 W KEN CARYL AVE
F124

City
LITTLETON

State
CO

Zip Code
80127

FEC ID number of contributing
federal political committee.

C C00623397

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

180.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2021

Transaction ID : SA12.84583

Amount of Each Receipt this Period

90.00

☐ Memo Item
Transfer

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 79
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Long, Conrad, B., Mr.,

Mailing Address PO Box 651

City
Fraser

State
CO

Zip Code
80442-0651

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Winter Park Resort

Occupation (for Individual)
Mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2021

Transaction ID : SA17.82448

Amount of Each Receipt this Period

75.00

☐ Memo Item

Headquarters Account - Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. A & D Cleaning Service, LLC

Mailing Address 2878 Ft. Scott Dr. #101

City
ArlingtonState
VAZip Code
22202-2347Purpose of Disbursement
Headquarters Account - Cleaning

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84372**

Amount of Each Disbursement this Period

330.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Airbnb, Inc.

Mailing Address 888 Brannan Street

City
San FranciscoState
CAZip Code
94103-0000Purpose of Disbursement
Travel Lodging (See Memo)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84566**

Amount of Each Disbursement this Period

1544.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Aitken, David, , Mr.,

Mailing Address 1240 N Ogden St Apt 4

City
DenverState
COZip Code
80218-1930Purpose of Disbursement
Civi-CRM Support

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84373**

Amount of Each Disbursement this Period

461.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

791.25

: 97 `A=G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.84566

Ultimate Vendor for DeSisto, Tara payment Line 21b ID 84750 2/2/2021

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. BB&T - Branch Banking & Trust

Mailing Address 1717 King St

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Bank Service Charge

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

FEC Identification Number

C**Transaction ID : SB21B.84377**

Amount of Each Disbursement this Period

227.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T Visa

Mailing Address P.O. BOX 580340

City
CharlotteState
NCZip Code
28258-0340Purpose of Disbursement
Headquarters Account - Credit Card Payment See Memo

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

142.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ADT Security Systems

Mailing Address PO Box 371878

City
PittsburghState
PAZip Code
15250-7878Purpose of Disbursement
Headquarters Acct Monthly Fee Security System

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

67.05

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

369.70

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Better Termite & Pest Control, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2021

Mailing Address 2647 Duke St

City
AlexandriaState
VAZip Code
22314-4593Purpose of Disbursement
Headquarters Account - Pest Control

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.84378

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Adobe Systems

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2021

Mailing Address 801 N. 324th St.

City
SeattleState
WAZip Code
98103-8882Purpose of Disbursement
Software Fee

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.84378

Amount of Each Disbursement this Period

52.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Airbnb, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2020

Mailing Address 888 Brannan Street

City
San FranciscoState
CAZip Code
94103-0000Purpose of Disbursement
Staff Travel - Hotel

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.84378

Amount of Each Disbursement this Period

2796.97

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Amazon Cloud Services

Mailing Address 1200 12th Avenue South #1200

City
SeattleState
WAZip Code
98144-2734Purpose of Disbursement
Cloud Web Server

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

19.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon.com

Mailing Address 1200 12th Avenue South #1200

City
SeattleState
WAZip Code
98144-2734Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

145.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO Box 536216

City
AtlantaState
GAZip Code
30353-6216Purpose of Disbursement
Wireless Wi-Fi Router

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

68.22

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. B & B Duplicators

Mailing Address 818 18th Street NW LL15

City
WashingtonState
DCZip Code
20006-0000Purpose of Disbursement
Non Candidate Party Printing Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

2861.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Boston Commerce - Your Favorite Inc.

Mailing Address 84 Gainsborough Street

City
BostonState
MAZip Code
02115-6525Purpose of Disbursement
Software Monthly Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

24.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Brainstorm - Astra Theme

Mailing Address 2035 Sunset Lk Rd #B-2

City
NewarkState
DEZip Code
19702-0000Purpose of Disbursement
CRM Plugin

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

47.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Capitol Promotions, Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	0			2	0	2	1		

Mailing Address PO box 231

249 N. Kensington Ave

City
GlensideState
PAZip Code
19038-0000Purpose of Disbursement
LP Political Materials

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.84378

Amount of Each Disbursement this Period

1368.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Comcast

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	2	1		

Mailing Address PO Box 37601

City
PhiladelphiaState
PAZip Code
19101-0601Purpose of Disbursement
Cable and Internet Phone

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.84378

Amount of Each Disbursement this Period

814.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Digital Ocean, Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	2	1		

Mailing Address 101 6th Ave

City
New YorkState
NYZip Code
10013-0000Purpose of Disbursement
SoftwareCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.84378

Amount of Each Disbursement this Period

5.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dropbox, Inc.

Mailing Address 185 Berry St STE 400

City
San FranciscoState
CAZip Code
94107-0000Purpose of Disbursement
File Sharing Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

19.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Duracard, Inc.

Mailing Address 8800 Foundry St.

City
SavageState
MDZip Code
20763-9512Purpose of Disbursement
Membership Card Materials

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

1001.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ECanvasser.com

Mailing Address Floor 3 Lawley House

City
Cork City Ireland T12N6PYState
ZZZip Code
20000Purpose of Disbursement
Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

3233.60

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. GoDaddy.com, Inc.

Mailing Address 14455 N Hayden Rd # 226

City
ScottsdaleState
AZZip Code
85260-6993Purpose of Disbursement
Domain Renewals & Transfers

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

78.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Google, Inc.

Mailing Address 1600 Amphitheatre Prky

City
Mt. ViewState
CAZip Code
94043-1351Purpose of Disbursement
GSuite Hosting Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

689.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. IBM - UStream.TV

Mailing Address 410 Townsend St

City
San FranciscoState
CAZip Code
94107-0000Purpose of Disbursement
Group List Server

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

99.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. John Companies Collocation

Mailing Address 5482 Complex St #114

City
San DiegoState
CAZip Code
92123-0000Purpose of Disbursement
Mail List Server

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	2	1		

FEC Identification Number

C

Transaction ID : SB21B.84378

Amount of Each Disbursement this Period

706.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. L2, Inc.

Mailing Address 18912 N Creek Pkwy # 201

City
BothellState
WAZip Code
98011-0000Purpose of Disbursement
Donor DataCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	3			2	0	2	1		

FEC Identification Number

C

Transaction ID : SB21B.84378

Amount of Each Disbursement this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lexis-Nexis t/a Accurant

Mailing Address P.O. Box 538358

City
AtlantaState
GAZip Code
30353-8358Purpose of Disbursement
Address Phone VerificationCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	1		

FEC Identification Number

C

Transaction ID : SB21B.84378

Amount of Each Disbursement this Period

142.52

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Little America Hotel & Resort - Cheyenne

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2021

Mailing Address 2800 W Lincolnway

City
CheyenneState
WYZip Code
82009-0000Purpose of Disbursement
Travel - Hotel

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

541.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft Corp.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2021

Mailing Address 1 Microsoft Way

City
RedmondState
WAZip Code
98052-8300Purpose of Disbursement
Software

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MJW Consulting

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2021

Mailing Address 3 Straightmead
Litton SomersetCity
UK BA3 4GWState
DCZip Code
20000Purpose of Disbursement
Software

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

360.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. PayPal Merchant Services

Mailing Address 2211 N. First St.

City
San JoseState
CAZip Code
95131-0000Purpose of Disbursement
Merchant Processing Fees

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	4			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

341.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Postmaster - USPS HQ

Mailing Address 475 L'Enfant Plaza SW #4446

City
WashingtonState
DCZip Code
20260-4446Purpose of Disbursement
Postage

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

7.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Sparkpost TuCows Inc.

Mailing Address 9130 Guilford Road Suite 100

City
ColumbiaState
MDZip Code
21046-0000Purpose of Disbursement
Software

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

580.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. StorQuest

Mailing Address 16980 Cottonwood Drive

City
ParkerState
COZip Code
80134-0000Purpose of Disbursement
Storage Rent

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

330.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Tadpole Collective

Mailing Address 322 N Broad St #1647

City
PhiladelphiaState
PAZip Code
19102-0000Purpose of Disbursement
Database Project

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

225.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address PO Box 86100

City
ChicagoState
ILZip Code
60666-0100Purpose of Disbursement
Travel - Air

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

519.80

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Wall St. Journal

Mailing Address PO Box 300

City
PrincetonState
NJZip Code
08543-0000Purpose of Disbursement
Subscription

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

19.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Zoom Video Communications, Inc.

Mailing Address 55 Almaden Boulevard, 6th Floor

City
San JoseState
CAZip Code
95113-0000Purpose of Disbursement
Video Conferencing Service

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84378**

Amount of Each Disbursement this Period

52.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T Visa

Mailing Address P.O. BOX 580340

City
CharlotteState
NCZip Code
28258-0340Purpose of Disbursement
Credit Card Payment See Memo

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2021

FEC Identification Number

C**Transaction ID : SB21B.84381**

Amount of Each Disbursement this Period

20663.86

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20663.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Blackbaud, Inc.

Mailing Address PO Box 844827

City
BostonState
MAZip Code
02284-4827Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2021

FEC Identification Number

C**Transaction ID : SB21B.84412**

Amount of Each Disbursement this Period

713.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Burns, Andrew, , ,

Mailing Address 470 3rd St S Unit 616

City
St. PetersburgState
FLZip Code
33701-4646Purpose of Disbursement
Affiliate Support Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2021

FEC Identification Number

C**Transaction ID : SB21B.84553**

Amount of Each Disbursement this Period

2560.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Burns, Andrew, , ,

Mailing Address 470 3rd St S Unit 616

City
St. PetersburgState
FLZip Code
33701-4646Purpose of Disbursement
Affiliate Support Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2021

FEC Identification Number

C**Transaction ID : SB21B.84414**

Amount of Each Disbursement this Period

2560.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5833.46

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Burns, Andrew, , ,

Mailing Address 470 3rd St S Unit 616

City
St. PetersburgState
FLZip Code
33701-4646Purpose of Disbursement
Reimbursed Expenses - See Memo

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2021

FEC Identification Number

C**Transaction ID : SB21B.84415**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. IThemes Media

Mailing Address 1720 S Kelly Ave

City
EdmondState
OKZip Code
73013-0000Purpose of Disbursement
Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2021

FEC Identification Number

C**Transaction ID : SB21B.84415**

Amount of Each Disbursement this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CareFirst BlueChoice, Inc.

Mailing Address PO Box 79749

City
BaltimoreState
MDZip Code
21279-0749Purpose of Disbursement
Employee health and Dental

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2021

FEC Identification Number

C**Transaction ID : SB21B.84417**

Amount of Each Disbursement this Period

1705.31

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1855.31

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Clemence, Chris, , ,

Mailing Address 3015 Mosby Dr

City
Sugar LandState
TXZip Code
77479-1616Purpose of Disbursement
Administrative Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	1		

FEC Identification Number

C **Transaction ID : SB21B.84418**

Amount of Each Disbursement this Period

 1840.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Clemence, Chris, , ,

Mailing Address 3015 Mosby Dr

City
Sugar LandState
TXZip Code
77479-1616Purpose of Disbursement
Administrative Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	2	1		

FEC Identification Number

C **Transaction ID : SB21B.84419**

Amount of Each Disbursement this Period

 1840.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Congdon, Rebekah, Gwen, ,

Mailing Address 7113 Avery Rd

City
Live OakState
TXZip Code
78233-5465Purpose of Disbursement
Administrative Support

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	1		

FEC Identification Number

C **Transaction ID : SB21B.84554**

Amount of Each Disbursement this Period

 2160.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 5840.00**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Congdon, Rebekah, Gwen, ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2021

Mailing Address 7113 Avery Rd

City
Live OakState
TXZip Code
78233-5465Purpose of Disbursement
Admin Support

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

FEC Identification Number

C**Transaction ID : SB21B.84421**

Amount of Each Disbursement this Period

2898.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DeSisto, Tara, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		02		2021

Mailing Address 63 Harvard St Apt 1

City
NewtonvilleState
MAZip Code
02460-2059Purpose of Disbursement
Management and Fundraising Consulting

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

FEC Identification Number

C**Transaction ID : SB21B.84569**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DeSisto, Tara, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		02		2021

Mailing Address 63 Harvard St Apt 1

City
NewtonvilleState
MAZip Code
02460-2059Purpose of Disbursement
Reimbursed Travel (See Memo)

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

FEC Identification Number

C**Transaction ID : SB21B.84571**

Amount of Each Disbursement this Period

1544.47

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7943.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. DeSisto, Tara, , ,

Mailing Address 63 Harvard St Apt 1

City
NewtonvilleState
MAZip Code
02460-2059Purpose of Disbursement
Management and Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84423**

Amount of Each Disbursement this Period

5639.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dominion Virginia Power

Mailing Address PO Box 26543

City
RichmondState
VAZip Code
23290-0001Purpose of Disbursement
Electric

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	0			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84426**

Amount of Each Disbursement this Period

320.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dunbar, Dominick, , ,

Mailing Address 75 Aquia Creek Rd

City
StaffordState
VAZip Code
22554-5528Purpose of Disbursement
Computer Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84556**

Amount of Each Disbursement this Period

600.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6559.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Edwards, Paula, , ,

Mailing Address P.O. Box 55456

City
WashingtonState
DCZip Code
20006-5456Purpose of Disbursement
Legal Fund Account - FEC Compliance

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2021

FEC Identification Number

C**Transaction ID : SB21B.84428**

Amount of Each Disbursement this Period

1600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Unemployment

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84429**

Amount of Each Disbursement this Period

25.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Withholding

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84430**

Amount of Each Disbursement this Period

1716.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3341.48

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Company

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84431**

Amount of Each Disbursement this Period

214.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Employee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84432**

Amount of Each Disbursement this Period

214.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Company

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84433**

Amount of Each Disbursement this Period

917.17

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1346.17

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Employee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84434**

Amount of Each Disbursement this Period

917.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Unemployment

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2021

FEC Identification Number

C**Transaction ID : SB21B.84435**

Amount of Each Disbursement this Period

7.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Withholding

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2021

FEC Identification Number

C**Transaction ID : SB21B.84436**

Amount of Each Disbursement this Period

1496.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2420.98

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Company

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2021

FEC Identification Number

C**Transaction ID : SB21B.84437**

Amount of Each Disbursement this Period

176.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Employee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2021

FEC Identification Number

C**Transaction ID : SB21B.84438**

Amount of Each Disbursement this Period

176.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Company

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2021

FEC Identification Number

C**Transaction ID : SB21B.84438**

Amount of Each Disbursement this Period

755.22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1108.46

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	1		

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Employee

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB21B.84440

Amount of Each Disbursement this Period

755.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fishman, Daniel, 84871931, ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	1		

Mailing Address 1270 Old Landing Rd

City
AccokeekState
MDZip Code
20607-3514Purpose of Disbursement
Employee Net Pay

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB21B.84441

Amount of Each Disbursement this Period

3096.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fishman, Daniel, 84871931, ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	1		

Mailing Address 1270 Old Landing Rd

City
AccokeekState
MDZip Code
20607-3514Purpose of Disbursement
Employee Net Pay

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB21B.84442

Amount of Each Disbursement this Period

2023.42

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5875.23

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. FP Mailing Solutions

Mailing Address PO Box 157

City
Bedford ParkState
ILZip Code
60499-0157Purpose of Disbursement
Postage & Meter Resets

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

FEC Identification Number

C**Transaction ID : SB21B.84443**

Amount of Each Disbursement this Period

2070.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hall, Oliver, , ,

Mailing Address 1835 16th St NW #5

City
WashingtonState
DCZip Code
20009-0000Purpose of Disbursement
Legal Fund Account - Legal Retainer

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

FEC Identification Number

C**Transaction ID : SB21B.84444**

Amount of Each Disbursement this Period

4500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Harris, Tyler, John, Mr.,

Mailing Address 6954 Gillis Way

City
GainesvilleState
VAZip Code
20155-1697Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84445**

Amount of Each Disbursement this Period

2547.03

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9117.03

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 63 OF 79

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Harris, Tyler, John, Mr.,

Mailing Address 6954 Gillis Way

City
Gainesville

State
VA

Zip Code
20155-1697

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2021

FEC Identification Number

C Transaction ID : SB21B.84446

Amount of Each Disbursement this Period

2547.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kraus, Robert, S., ,

Mailing Address 205 Yoakum Pkwy
Apt 1111

City
Alexandria

State
VA

Zip Code
22304-3857

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 03 / 2021

FEC Identification Number

C Transaction ID : SB21B.84447

Amount of Each Disbursement this Period

1640.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kraus, Robert, S., ,

Mailing Address 205 Yoakum Pkwy
Apt 1111

City
Alexandria

State
VA

Zip Code
22304-3857

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2021

FEC Identification Number

C Transaction ID : SB21B.84448

Amount of Each Disbursement this Period

2243.46

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6431.46

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. MacCutcheon, Michelle, Renea, Mrs.,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	1		

Mailing Address 18 Ross St

City
LebanonState
OHZip Code
45036-2024Purpose of Disbursement
Administrative Consulting

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.84449**

Amount of Each Disbursement this Period

3360.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Maryland Revenue Administration

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	1		

Mailing Address PO Box 1829

City
AnnapolisState
MDZip Code
21404-1829Purpose of Disbursement
MD - Withholding

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.84450**

Amount of Each Disbursement this Period

184.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Maryland Revenue Administration

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	1		

Mailing Address PO Box 1829

City
AnnapolisState
MDZip Code
21404-1829Purpose of Disbursement
MD - Withholding

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.84451**

Amount of Each Disbursement this Period

116.43

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3661.13

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Master Print - Vomela, Inc.

Mailing Address PO Box 1467

City
NewingtonState
VAZip Code
22122-1467Purpose of Disbursement
LP Political Materials

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84453**

Amount of Each Disbursement this Period

394.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Master Print - Vomela, Inc.

Mailing Address PO Box 1467

City
NewingtonState
VAZip Code
22122-1467Purpose of Disbursement
LP Political Materials

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84454**

Amount of Each Disbursement this Period

1253.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. McLaughlin, Matthew, , ,

Mailing Address 883 E 4th St

City
S. BostonState
MAZip Code
02127-0000Purpose of Disbursement
LPedia Digitizing of VHS Tapes

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84455**

Amount of Each Disbursement this Period

450.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2097.03

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mears, Jessica, L., ,Mailing Address 132 Roberts Ln
Apt # 200City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2021

FEC Identification Number

C **Transaction ID : SB21B.84456**

Amount of Each Disbursement this Period

 1735.76☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mears, Jessica, L., ,Mailing Address 132 Roberts Ln
Apt # 200City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2021

FEC Identification Number

C **Transaction ID : SB21B.84457**

Amount of Each Disbursement this Period

 363.11☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Merchant Services

Mailing Address 890 Mountain Ave

City
New ProvidenceState
NJZip Code
07974-0000Purpose of Disbursement
Merch Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

FEC Identification Number

C **Transaction ID : SB21B.84458**

Amount of Each Disbursement this Period

 260.66☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 2359.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Meridian - Konica, Inc.

Mailing Address 1595 Spring Hill Rd Ste 450

City
ViennaState
VAZip Code
22182-0000Purpose of Disbursement
Copier - Monthly Printing and Maintenance

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84459**

Amount of Each Disbursement this Period

80.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Omega Oak - Buffalo Rock

Mailing Address 24524 Playhouse Road

City
KeystoneState
SDZip Code
57751-0000Purpose of Disbursement
Administrative Support Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84461**

Amount of Each Disbursement this Period

1620.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Oquirrh Mountain Strategies, LLC

Mailing Address 8831 W State Highway

City
CoppertonState
UTZip Code
84006-0000Purpose of Disbursement
Candidate Recruitment and Support Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84555**

Amount of Each Disbursement this Period

4271.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5972.19

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Oquirrh Mountain Strategies, LLC

Mailing Address 8831 W State Highway

City
CoppertonState
UTZip Code
84006-0000Purpose of Disbursement
Candidate Recruitment & Support Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2021

FEC Identification Number

C**Transaction ID : SB21B.84463**

Amount of Each Disbursement this Period

4123.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PayPal Merchant Services

Mailing Address 2211 N. First St.

City
San JoseState
CAZip Code
95131-0000Purpose of Disbursement
Merch Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2021

FEC Identification Number

C**Transaction ID : SB21B.84464**

Amount of Each Disbursement this Period

1150.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
RenoState
NVZip Code
89520-3015Purpose of Disbursement
Payroll Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2021

FEC Identification Number

C**Transaction ID : SB21B.84466**

Amount of Each Disbursement this Period

135.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5409.79

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
RenoState
NVZip Code
89520-3015Purpose of Disbursement
Payroll Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84467**

Amount of Each Disbursement this Period

16.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Round House Sq UOA

Mailing Address 6231 Leesburg Pk #100

City
Falls ChurchState
VAZip Code
22044-0000Purpose of Disbursement
Headquarters Acct - Association Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84468**

Amount of Each Disbursement this Period

215.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Schulz, Cara, L., ,

Mailing Address 30 Walden St

City
BurnsvilleState
MNZip Code
55337-3678Purpose of Disbursement
Candidate Recruitment and Support Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.84561**

Amount of Each Disbursement this Period

4500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4731.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Stigler Printing

Mailing Address 106 SE A Street

City
StiglerState
OKZip Code
74462-0000Purpose of Disbursement
LP News Printing

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2021

FEC Identification Number

C**Transaction ID : SB21B.84470**

Amount of Each Disbursement this Period

245.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.

Mailing Address 510 Townsend Street

City
San FranciscoState
CAZip Code
94103-0000Purpose of Disbursement
Merch Processing Fee

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2021

FEC Identification Number

C**Transaction ID : SB21B.84471**

Amount of Each Disbursement this Period

1747.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Thexton, Matthew, A., Mr.,

Mailing Address PO Box 6232

City
Falls ChurchState
VAZip Code
22040-6232Purpose of Disbursement
Employee Net Pay

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	03	/	2021

FEC Identification Number

C**Transaction ID : SB21B.84472**

Amount of Each Disbursement this Period

1229.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3222.19

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Thexton, Matthew, A., Mr.,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2021

Mailing Address PO Box 6232

City
Falls ChurchState
VAZip Code
22040-6232

FEC Identification Number

C**Transaction ID : SB21B.84473**

Amount of Each Disbursement this Period

1159.84

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Vanguard - Ascensus

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2021

Mailing Address PO Box 28067

City
New YorkState
NYZip Code
10087-8067

FEC Identification Number

C**Transaction ID : SB21B.84474**

Amount of Each Disbursement this Period

2658.26

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Vanguard - Ascensus

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2021

Mailing Address PO Box 28067

City
New YorkState
NYZip Code
10087-8067

FEC Identification Number

C**Transaction ID : SB21B.84475**

Amount of Each Disbursement this Period

1096.30

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4914.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Unemployment Company

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2021

FEC Identification Number

C **Transaction ID : SB21B.84477**

Amount of Each Disbursement this Period

 12.48☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Withholding

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2021

FEC Identification Number

C **Transaction ID : SB21B.84478**

Amount of Each Disbursement this Period

 623.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Unemployment Company

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2021

FEC Identification Number

C **Transaction ID : SB21B.84479**

Amount of Each Disbursement this Period

 5.20☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 640.68

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Withholding

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2021

FEC Identification Number

C**Transaction ID : SB21B.84480**

Amount of Each Disbursement this Period

569.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

569.00

113073.75

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 74 OF 79

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aitken, David, , Mr.,Nature of Debt (Purpose):
CIVI CRM Support

Mailing Address 1240 N Ogden St Apt 4

City
DenverState
COZip Code
80218-1930

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84571

Amount Incurred This Period

583.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

583.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bigeye Direct, Inc.Nature of Debt (Purpose):
Non Candidate Party Printing Service

Mailing Address PO Box 710865

City
Oak HillState
VAZip Code
20171-0865

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84572

Amount Incurred This Period

2174.51

Payment This Period

0.00

Outstanding Balance at Close of This Period

2174.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Burns, Andrew, , ,Nature of Debt (Purpose):
Affiliate Support Service

Mailing Address 470 3rd St S Unit 616

City
St. PetersburgState
FLZip Code
33701-4646

Outstanding Balance Beginning This Period

2560.00

Transaction ID : SD10.80124

Amount Incurred This Period

0.00

Payment This Period

2560.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2758.26

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 75 OF 79

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Burns, Andrew, , ,Nature of Debt (Purpose):
Affiliate Support Service

Mailing Address 470 3rd St S Unit 616

City

St. Petersburg

State

FL

Zip Code

33701-4646

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84573

Amount Incurred This Period

2560.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2560.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Congdon, Rebekah, Gwen, ,Nature of Debt (Purpose):
Fundraising Consulting

Mailing Address 7113 Avery Rd

City

Live Oak

State

TX

Zip Code

78233-5465

Outstanding Balance Beginning This Period

2160.00

Transaction ID : SD10.80125

Amount Incurred This Period

0.00

Payment This Period

2160.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Congdon, Rebekah, Gwen, ,Nature of Debt (Purpose):
Fundraising Consulting

Mailing Address 7113 Avery Rd

City

Live Oak

State

TX

Zip Code

78233-5465

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84574

Amount Incurred This Period

2160.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2160.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

4720.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 76 OF 79

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DeSisto, Tara, , ,

Nature of Debt (Purpose):

Management and Fundraising
Consulting/Travel Reimbursement

Mailing Address 63 Harvard St Apt 1

City

Newtonville

State

MA

Zip Code

02460-2059

Outstanding Balance Beginning This Period

5044.47

Transaction ID : SD10.80126

Amount Incurred This Period

0.00

Payment This Period

5044.47

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DeSisto, Tara, , ,

Nature of Debt (Purpose):

Management and Fundraising Consulting

Mailing Address 63 Harvard St Apt 1

City

Newtonville

State

MA

Zip Code

02460-2059

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84575

Amount Incurred This Period

3500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DeSisto, Tara, , ,

Nature of Debt (Purpose):

Travel Reimbursement

Mailing Address 63 Harvard St Apt 1

City

Newtonville

State

MA

Zip Code

02460-2059

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84576

Amount Incurred This Period

1036.34

Payment This Period

0.00

Outstanding Balance at Close of This Period

1036.34

1) SUBTOTALS This Period This Page (optional)..... ►

4536.34

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 77 OF 79

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Dunbar, Dominick, , ,Nature of Debt (Purpose):
Computer Services

Mailing Address 75 Aquia Creek Rd

City
StaffordState
VAZip Code
22554-5528

Outstanding Balance Beginning This Period

600.00

Transaction ID : SD10.80129

Amount Incurred This Period

0.00

Payment This Period

600.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MacCutcheon, Michelle, Renea, Mrs.,Nature of Debt (Purpose):
Administrative Consulting

Mailing Address 18 Ross St

City
LebanonState
OHZip Code
45036-2024

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84577

Amount Incurred This Period

1440.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1440.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Omega Oak - Buffalo RockNature of Debt (Purpose):
Administrative Support

Mailing Address 24524 Playhouse Road

City
KeystoneState
SDZip Code
57751-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84578

Amount Incurred This Period

1814.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1814.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3254.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 78 OF 79

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oquirrh Mountain Strategies, LLC

Nature of Debt (Purpose):

Candidate Recruitment and Support Services

Mailing Address 8831 W State Highway

City

Copperton

State

UT

Zip Code

84006-0000

Outstanding Balance Beginning This Period

4271.80

Transaction ID : SD10.80127

Amount Incurred This Period

0.00

Payment This Period

4271.80

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oquirrh Mountain Strategies, LLC

Nature of Debt (Purpose):

Candidate Recruitment and Support Services

Mailing Address 8831 W State Highway

City

Copperton

State

UT

Zip Code

84006-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84579

Amount Incurred This Period

4874.05

Payment This Period

0.00

Outstanding Balance at Close of This Period

4874.05

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Schulz, Cara, L., ,

Nature of Debt (Purpose):

Candidate Recruitment and Support Services

Mailing Address 30 Walden St

City

Burnsville

State

MN

Zip Code

55337-3678

Outstanding Balance Beginning This Period

4500.00

Transaction ID : SD10.80128

Amount Incurred This Period

0.00

Payment This Period

4500.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

4874.05

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 79 OF 79

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Schulz, Cara, L., ,

Nature of Debt (Purpose):

Candidate Recruitment and Support Services

Mailing Address 30 Walden St

City

Burnsville

State

MN

Zip Code

55337-3678

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84580

Amount Incurred This Period

3600.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stenquist, Christine, , ,

Nature of Debt (Purpose):

Legislative Preparation

Mailing Address 290 West 100 North

City

Kaysville

State

UT

Zip Code

84037

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.84581

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

4600.00

2) TOTALS This Period (last page this line number only)..... ►

24742.65

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

24742.65